



# An Evaluation Framework for Iowa's Family Development and Self-Sufficiency Program



Prepared by  
Hornby Zeller Associates, Inc.  
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## **An Evaluation Framework for Iowa's Family Development and Self-Sufficiency Program**

Provided to the Iowa Family Development and Self-Sufficiency Program,  
a program of the Department of Human Rights

Lucas State Office Building

Des Moines, Iowa 50319

515.281.3861

[www.iowafadss.org](http://www.iowafadss.org)

Prepared under contract DCAA FaDSS 14-1 by

Sarah Krichels Goan, M.P.P.

Darshana Mutz Spach, M.Ed.

Hornby Zeller Associates, Inc.

[www.hornbyzeller.com](http://www.hornbyzeller.com)

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## Introduction

Iowa's Family Development and Self-Sufficiency (FaDSS) Grant Program dates back to 1988 when the state assembly established the Family Development and Self-Sufficiency Council to study, fund and evaluate programs which provide developmental services to families who are at risk of long-term welfare dependency. Now an established program, FaDSS currently works with 17 grantees across the state.

Participation in FaDSS is a voluntary option for people receiving Family Investment Program (FIP) benefits. Eligible families are identified and referred to the program by the Department of Human Services, PROMISE JOBS Program, other third-party sources, and self-referrals. The program is delivered to families through home visits with Certified Family Development Specialists (FDS) using a strengths-based approach of service referrals, community linkage, assessment and goal-setting.

FaDSS has established high standards for its grantees, who must meet major programming components which include standards for staffing, program capacity and community linkages and partnerships. For example, FaDSS staff must complete the Family Development Certification Training and uphold mandatory annual training requirements (10 hours per year). Specialist caseloads should not exceed 21 families for full time workers.

### Box 1. FaDSS Core Components

*Assessment*, a self-reflection process completed with each family, including a self-sufficiency assessment specific to FaDSS (among others);

*Goal setting*, to help the family develop long-term goals with guidance from the Family Development Specialist and in alignment with their goals developed with PROMISE JOBS;

*Home visits*, which serve as the foundation for all FaDSS services, with a minimum of two home visits per month during the first three months and at least one home visit per month after that;

*Referral*, to help families access community resources;

*Flexible funding*, whereby FaDSS provides funds (as available) for supportive services to address a family's particular needs when other resources are not available;

*Support*, which is ongoing, strengths-based and focused on solutions;

*Advocacy*, where the Family Development Specialist helps families to develop self-advocacy skills through modeling and empowerment to ensure services are equitable, inclusive and responsive; and

*Group activities*, to break isolation, encourage networking and help families reconnect to their community.

A core principle of the program is that the Certified Family Development Specialists work with each family to establish goals and objectives that are tailored to their own unique needs and culture. In addition FaDSS operates under eight Core Service Components that, when followed with fidelity, contribute to the program's ability to reliably expect positive outcomes for the families served (see Box 1). The evidence and supporting literature for this comprehensive approach to promoting self-sufficiency can be found in the companion FaDSS Research Compendium for Program Core Components. That document reviews the most compelling literature about self-sufficiency programs and presents the evidence supporting each core component.

The purpose of this plan is to enhance the FaDSS program's evaluation capacity and guide future data analysis and evaluation efforts. The plan is grounded in sound research methods and evidence-based approaches. It is divided into two parts: the following section lays out the evaluation design by first presenting the logic model and then describing in detail the data sources and the indicators included. This section also establishes the standards that should be used when considering new data sources or indicators. The second section discusses areas FaDSS could enhance to support a more robust program evaluation. In it, each topic area describes the component to be enhanced and the pros and cons associated with those changes. It is intended to help the FaDSS program and its Advisory Council consider changes to the program's data collection, analysis and reporting efforts.



## Evaluation of the FaDSS Program


Evaluation helps a program to understand what aspects of its services are working, or not, in a planned and organized way. The results of evaluation may be used to refine program implementation, concretely illustrate progress toward program goals, and sustain funding for evidence-based programming.

Evaluation can also function as a tool in a larger effort to strengthen a program's infrastructure. It can help lead agencies and collaborating organizations to think more deeply about the specific strengths and needs of the program and to engage in a dialogue about how best to address the identified issues. It can also help determine the best combination of strategies to use to reach the desired outcomes.

## Program Logic Model

A logic model graphically displays what a program intends to do, what it hopes to accomplish and the longer-term impact it hopes to have. It systematically depicts an understanding of the relationships between a program's resources and activities (inputs), the short-term product of the work (outputs), the benefits the program achieves for participants (outcomes), and the long-term results of those outcomes on the community (impacts). The FaDSS logic model can be found on the following page and provides the overall framework for the subsequent evaluation plan.

The first three parts of the logic model contain a summary description of the program resources and inputs, the state and local activities and the associated program outputs. Outputs typically represent an amount, quantity or volume that can be associated with the program activities. The last three columns of the logic model represent the short-term, medium-term and long-term outcomes associated with program participation; that is, the positive changes that we expect to see for families that participate in the program. The final column also includes social indicators at the state level where the FaDSS program logically contributes, although the extent of that contribution is unknown.

Resources/Inputs	Activities	Outputs (Program)	Short-term (Family-level)	Medium-term (Family-level)	Long-term (Family and State-level)
<b>Staffing &amp; Resources:</b> <ul style="list-style-type: none"> <li>• 3 State Program Staff</li> <li>• 17 community agencies with ~100 staff (grantees)</li> <li>• State and local funding streams</li> </ul> <b>Infrastructure</b> <ul style="list-style-type: none"> <li>• FaDSS Council</li> <li>• FaDSS Program Standards and Fidelity Monitoring</li> </ul> <b>Training</b> <ul style="list-style-type: none"> <li>• FDS Certification</li> <li>• 10 hours ongoing training</li> </ul> <b>Data Collection</b> <ul style="list-style-type: none"> <li>• Web-based data system</li> <li>• Standardized family assessment tools</li> <li>• Data/information sharing with Promise Jobs and DHS</li> <li>• Annual Grantee Activity Report</li> </ul>	<b>Statewide Program</b> <ul style="list-style-type: none"> <li>• FaDSS Council meetings</li> <li>• Work done through council committees</li> <li>• Certification training and technical assistance</li> <li>• Site observation and fidelity review</li> <li>• Outreach/collaboration/system-building activities</li> <li>• Process improvement efforts – CQI</li> <li>• Annual FaDSS Fiscal Year Report</li> </ul> <b>Direct Service</b> <ul style="list-style-type: none"> <li>• Outreach, referrals, relationship development</li> <li>• Home visits with a certified Family Development Specialist                             <ul style="list-style-type: none"> <li>◦ Provision of individualized life skills education, collaboration, and case planning</li> <li>◦ Aftercare planning</li> </ul> </li> <li>• Resource development (to meet family needs)</li> <li>• Supervision of FDS                             <ul style="list-style-type: none"> <li>◦ 1:1 supervision/staffing</li> <li>◦ File reviews</li> </ul> </li> </ul>	<b>Statewide Program</b> <ul style="list-style-type: none"> <li>• Number of grantee sites providing services with fidelity (<i>i.e., grantees meeting established thresholds of program standards</i>).</li> <li>• Number of grantee sites fulfilling capacity (<i>i.e., 95% of capacity or higher</i>).                             <ul style="list-style-type: none"> <li>◦ Number of certified FDS</li> <li>◦ Number newly certified FDS in past year</li> <li>◦ FDS retention rates</li> </ul> </li> </ul> <b>Direct Service</b> <ul style="list-style-type: none"> <li>• Number of families referred, eligible, enrolled</li> <li>• Number of families served</li> <li>• Number of home visits per family</li> <li>• Average length of stay</li> <li>• Number of families exiting (<i>number at 3-months post FIP</i>)</li> <li>• Number of families with individual goals                             <ul style="list-style-type: none"> <li>◦ Number/type of assets identified; average per family</li> <li>◦ Number/type of barriers identified; average per family</li> </ul> </li> <li>• Flexible funding, by type and average per family</li> <li>• Number of collaborating service agencies</li> </ul>	<p>Families who participate in FaDSS gain the following:</p> <ul style="list-style-type: none"> <li>• Advanced pre-employment skills and employment skills</li> <li>• Ability to meet nutrition (food) needs</li> <li>• Safe and stable housing</li> <li>• Access to basic health care coverage (SSM)</li> <li>• Access to reliable public or private transportation</li> <li>• Access to appropriate treatment services</li> <li>• Participation in activities that strengthen and enhance family</li> </ul>	<p>Families are more stable and economically self-sufficient 3-months post-FIP, as indicated by the following:</p> <ul style="list-style-type: none"> <li>• Increased employment</li> <li>• Increased earnings and income</li> <li>• Increased use of SSI</li> <li>• Increased education level</li> <li>• Decreased use of other benefits programs (e.g., SNAP, subsidized housing)</li> <li>• Enhanced family strengths/functioning</li> <li>• Reduced incidence of significant hardships</li> <li>• Improved sense of health and well-being</li> </ul>	<p>The benefits to families who exit FaDSS are sustained, as indicated by:</p> <ul style="list-style-type: none"> <li>• Job retention</li> <li>• Wage growth</li> <li>• Low return to welfare</li> <li>• Low return to/reliance on other benefits programs</li> </ul>  <p>FaDSS is cost-effective for Iowa:</p> <ul style="list-style-type: none"> <li>• Positive return on investment</li> <li>• Reduced rate of welfare utilization</li> <li>• Reduced unemployment</li> <li>• Increased state tax revenue</li> </ul> <p>Iowa's children, youth and families are healthier and more productive:</p> <ul style="list-style-type: none"> <li>• Reduced child poverty</li> <li>• Reduced child welfare involvement</li> <li>• Increased median income/fewer people living in poverty</li> <li>• Improved health outlook</li> <li>• Increased educational attainment</li> </ul>

## Current Data Collection Efforts

The FaDSS program collects a wealth of information about its program which it uses to monitor contracts, program compliance, family outcomes, and to produce annual reports. Grantees undergo a fidelity site visit which follows a prescribed protocol; home visits are observed and information entered into a structured tool. At the program level, each grantee must submit an annual activity report, an aggregated snapshot of its participants, budgets (and amendments), and work plans (and amendments). Referrals to the program are tracked, including the referral source, the receiving grantee and whether the family was served or placed on a waitlist. At the participant level, Family Development Specialists collect information and record it in an on-line data information system called the *Web-based Profile*. This includes basic demographics, contacts and notes about family progress. As part of the program, Specialists also assess families for strengths and challenges to self-sufficiency and help them to develop goals for self-sufficiency, making referrals and providing support as needed. Again, all this information is recorded in the *Web-based Profile* system. A full depiction of the information being collected and monitored by the FaDSS program can be found in Figure 1 below, organized into three categories: Program Fidelity Monitoring, Program Delivery and Family-Level Information.

**Figure 1. Current FaDSS Data Collection**

Program Fidelity Monitoring:	Program Delivery:	Family-Level Information:
<ul style="list-style-type: none"> <li>• Survey Tools for FaDSS Specialists, Families and Partners</li> <li>• Program Management Self-Assessment</li> <li>• File Review Protocol</li> <li>• Home Visit Observation Tool</li> <li>• FDS Personnel Documentation Review Form</li> <li>• Supervisory and Administrative Standard Review Form</li> </ul>	<ul style="list-style-type: none"> <li>• Annual Program Report               <ul style="list-style-type: none"> <li>• <i>Annual Activity Reports</i></li> <li>• <i>Annual Snapshot Reports</i></li> <li>• <i>Community Collaborations</i></li> </ul> </li> <li>• Web-based Profile</li> <li>• Budgets (and Amendments)</li> <li>• Work Plans (and Amendments)</li> </ul>	<ul style="list-style-type: none"> <li>• Family Referrals</li> <li>• Family Demographics</li> <li>• FaDSS Monthly Reporting</li> <li>• Difficulty of Service Scale</li> <li>• FaDSS Self-Sufficiency Matrix</li> <li>• FaDSS Family Profile</li> <li>• Family Goal Planning</li> </ul>

## Selecting Indicators

When faced with a multitude of information, it is difficult to know what to look at for on-going program evaluation purposes. Indicators provide specific information on the state or condition of something in particular. It is important to select a few key indicators and use them consistently for several years so the program can track changes over time.

By identifying critical indicators, FaDSS can help answer the questions, "Where are we now as a program?" and "Where do we want to be in two, five, and ten years?" By systematically and routinely tracking the same indicators over time, the program can determine if it is meeting short-term and longer-term goals.

HZA reviewed all the current data collection instruments and selected critical indicators to include in this framework that relate to each component of the FaDSS Program Logic Model. Most of these indicators can be updated annually and are readily available so that FaDSS staff and key stakeholders can easily access the information. Commonly available social indicators are also included so that FaDSS can compare certain indicators in Iowa to other states when possible.

Monitoring these indicators over the coming years will give FaDSS an understanding of where progress is being made, and where procedures and policies may need to be changed to realize greater impact. The current data sources used in the evaluation plan are described in detail on the following page. Some indicators are not currently available, however. These are discussed in more detail in the second section which discusses *Recommendations for Enhancement*.

### Box 2.

#### Selecting Data Sources

There are many sources of data that programs can use to monitor progress and measure success. This evaluation plan selects indicators from data sources that meet the following criteria:

- **Relevant:** Data are directly related to a core program component or outcome, such as assessments or income.
- **Timely:** Data are current, usually from the previous year.
- **Available:** Data are easily available from a reliable source, such as the program itself, a state agency, or the U.S. government.
- **Reliable:** Data reflect the same indicator in the same manner for the same population each year.
- **Trendable:** Data are available for several years over time so that trends can be observed.

Program evaluation plans are hardly static, however. Research emerges, funding shifts or infrastructure changes in such a way that a program must examine itself in a new way. The standards articulated above should guide FaDSS staff when considering new data sources or indicators to monitor in the future.

## Program Data Sources

The following data sources are currently collected by the FaDSS program. They are the sources for the outputs and direct service metrics included in Tables 1 and 2.

- ***FaDSS State Program Data.*** The FaDSS program collects information about state-level efforts related to FDS certification, training and on-site fidelity reviews and observations with grantee sites.
- ***FaDSS Web-based Profile.*** The FaDSS program hosts an on-line data system into which grantee staff enter data that is collected for each family, including items such as demographics, referral source, start and end dates, number of home visits, employment, monthly income by source, reasons for leaving the program and information from the Self-Sufficiency Matrix and the Difficulty of Service Scale.
  - *Self-Sufficiency Matrix (SSM).* A matrix containing 17 critical domains of self-sufficiency where families are rated on each using a 1 to 5 anchored scale. The rating is completed by the FDS twice (at program enrollment and program exit) based on information collected from the family.
  - *Difficulty of Service Scale (DOS).* The DOS is completed for each adult in the family by the FDS based on his or her observations and assessment of the family. The DSS defines five levels of difficulty based on characteristics such as social supports, substance abuse, mental health, self-image, and hygiene.
- ***FaDSS Annual Reports.*** Each year, local grantee agencies are required to submit annual reports to the state level program. These reports include budget and capacity information, a narrative of program and family success, a rated list of collaborating agencies and detailed activity reporting (see below).
  - *FaDSS Annual Activity Reports.* As a component of the annual reports, local grantee agencies are required to submit a summary of their program activities. These reports include measures such as referrals, enrollments, and the number of home visits. Grantees also report on service activities such as the number of families accessing appropriate services (e.g., mental health, domestic violence), involved in family strengthening activities, or participating in education programming. The reports are compiled and analyzed annually by FaDSS program staff.

## State Data Sources

The following data sources are from state level systems and can be used to capture some of the Social Impact Indicators, as shown in Table 3 below. Since they are state data sources, county-level comparisons are often possible.

- ***Iowa Department of Human Services, ELIAS.*** ELIAS is Iowa's online reporting system for benefits services, which is still under development. The FaDSS program expects to access service data from this system in the future and so it is included here.
- ***Iowa Labor Services Division.*** The Iowa Division of Labor Services monitors various employment statistics from local and national data, which can be accessed online at <http://www.iowaworkforce.org/lmi/laborforce/index.html>.
- ***Iowa Department of Revenue.*** The Iowa Department of Revenue provides annual research and statistics on annual tax revenue, which can be accessed online at <https://tax.iowa.gov/resources/research-statistics>.

## National Data Sources

The following data sources can be used to capture the Social Impact Indicators, as shown in Table 3 below. Because they are national sources, they also allow for comparisons to other states.

- ***Behavioral Risk Factor Surveillance Survey.*** U.S. Centers for Disease Control conducts an annual survey of adults in each state about a series of health topics including perceptions of overall health. Data are readily available each year and can be trended at the state level. Comparisons to national estimates or other states can also be made.<sup>1</sup>
- ***Child Welfare Outcomes Report Data.*** The U.S. Department of Health and Human Services produces this annual report to provide information in seven categories related to widely accepted performance objectives for child welfare practice. Data for most of the measures come from the National Child Abuse and Neglect Data System (NCANDS) and the Adoption and Foster Care Analysis and Reporting System (AFCARS).<sup>2</sup>

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<sup>1</sup> U.S. Centers for Disease Control and Prevention, Office of Surveillance, Epidemiology, and Laboratory Services. <http://apps.nccd.cdc.gov/brfss/> Accessed September 30, 2014.

<sup>2</sup> The U.S. Department of Health and Human Services, Children's Bureau. <http://cwoutcomes.acf.hhs.gov/data/overview> Accessed September 30, 2014.

- ***State and County QuickFacts.*** The U.S. Census Bureau produces QuickFacts summary profiles and includes statistics for the nation, for all states and counties, and for cities and towns with more than 5,000 people. The profiles contain frequently requested indicators and are updated annually.<sup>3</sup>
- ***Kids Count.*** Kids Count is a project of the Annie E. Casey Foundation. The Kids Count website draws data from numerous state and federal sources and is the premier source for data on child and family well-being in the United States.<sup>4</sup> Data are readily available each year and comparisons to national estimates or other states can be made.

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<sup>3</sup> U.S. Census Bureau. <http://quickfacts.census.gov/qfd/index.html> Accessed September 30, 2014.

<sup>4</sup> Kids Count, a project of the Annie E. Casey Foundation. <http://datacenter.kidscount.org/>. Accessed September 30, 2014.



## Program Output Indicators

Program outputs are quantifiable results of the program activities and in this plan are grouped into statewide program outputs (e.g., number of staff, number of grantee sites) and direct service outputs (e.g., number of families served, length of program duration). Table 1 shows the selected program indicators FaDSS should use to monitor how the program operates. Indicators listed below that are not currently captured on the annual program reporting should be added in the future and are denoted with an asterisk.

Table 1. Program Output Indicators		
Area	Indicator	Source
<b>Statewide Program</b>	Number of grantee sites providing services with fidelity (per onsite review)	State program data
	Number of grantee sites fulfilling capacity	State program data
	Number of FDS certified*	State program data*
	Number newly certified FDS in past year*	State program data*
	FDS retention rates*	State program data*
<b>Direct Services</b>	Number of families referred, eligible, enrolled	Annual Activity Report, Web-based Profile
	Number of families served	Web-based Profile
	Number of home visits per family	Web-based Profile
	Average length of stay	Web-based Profile
	Number of families exiting (number a 3-months post FIPS)	Web-based Profile
	Number of families with individual goals, by type*	Annual activity report*
	Number/type of assets identified; average number of assets identified per family*	Annual activity report*
	Number/type of barriers identified; average number of barriers identified per family*	Annual activity report*
	Flexible funding, by type and average per family*	Annual activity report*
	Number of collaborating service agencies	Annual activity report



## Participant-related Outcome Indicators

FaDSS indicators for participant outcomes are directly tied to the goals of the program, and include individual behavior changes and longer-term employment outcomes. Table 2 shows the participant-level indicators that FaDSS is monitoring. Areas where additional data collection efforts and enhancements should be considered are noted with an asterisk and discussed in more detail in the recommendations for enhancement section.

**Table 2. Participant Outcome Indicators**

Area	Indicator	Source
<b>Short-term Outcomes</b>	Advanced pre-employment skills and employment skills	Web-based Profile, Annual Activity Report, SSM
	Ability to meet nutrition (food) needs	Web-based Profile, SSM
	Safe and stable housing	Web-based Profile, SSM
	Access to basic health care coverage	Web-based Profile, SSM
	Access to reliable public or private transportation	Web-based Profile, SSM
	Access to appropriate treatment services (Mental Health, Substance Abuse, Domestic Violence)	Web-based Profile, Activity Report, SSM
	Participation in activities that strengthen and enhance family	Web-based Profile, Activity Report, SSM
<b>Medium-term</b>	Increased employment	Web-based Profile
	Increased earnings and income	Web-based Profile
	Increased SSI	Web-based Profile
	Increased education level	Web-based Profile
	Decreased use of other benefits programs (e.g., SNAP, subsidized housing)	Web-based Profile
	Enhanced family functioning*	Follow-up Survey, Strength Assessment*
	Reduced significant hardships*	Follow-up Survey, Strength Assessment*
	Improved sense of health and well-being*	Follow-up Survey, Strength Assessment*
<b>Long-term</b>	Job retention*	Follow-up Survey*
	Wage growth*	Follow-up Survey*
	Low return to welfare*	Follow-up Survey, Iowa DHS ELIAS*
	Low return to/reliance on other benefits programs*	Follow-up Survey, DHS ELIAS*

## Social Impact Indicators

Social and economic indicators measure both the context in which FaDSS conducts its work and the long-term impact of FaDSS and its partners on the community. The socio-economic environment presents both challenges and opportunities for FaDSS, large and small businesses, schools, community members and others who work to improve the quality of life here. FaDSS cannot be expected to set targets for changes in these indicators because so many other factors have an impact; rather the program can monitor this “big picture” to follow changes over time to which the program logically contributes. Table 3 shows the social and economic indicators FaDSS has chosen to monitor, again with an asterisk to indicate those that represent new metrics.

Table 3. Social Impact Indicators		
Area	Indicator	Source
<b>Cost-Effectiveness</b>	Return on investment	Estimation
	Reduced total rate of welfare utilization*	Iowa DHS ELIAS*
	Reduced unemployment rate*	Iowa Labor Services Division*
	Increased state tax revenue*	Iowa Department of Revenue*
<b>Health and Well-being</b>	Reduced child poverty*	Kids Count*
	Reduced child welfare*	Child Welfare Outcomes Report*
	Reduced people living in poverty*	QuickFacts*
	Increased median/mean income*	QuickFacts*
	Reduced children without insurance*	Kids Count*
	Improved health outlook*	BRFSS*
	Increased educational attainment (children)*	Kids Count*

## Recommendations for Enhancement

As previously stated, the FaDSS program collects a wide range of programmatic and family-level outcomes. In reviewing the current efforts, HZA determined three areas where improvements should be considered by the FaDSS Program and its Advisory Council.

### Measuring Self-Sufficiency: Matrices and Assessments

Iowa uses the Self-Sufficiency Matrix (SSM) which has been adapted for use in Iowa from the Self-Sufficiency Matrix originally developed in Washington State.<sup>5</sup> The SSM is now used by programs in multiple states, particularly homeless prevention and housing programs, including Washington, Arizona, Utah and California. An adaptation of the tool in use in the Netherlands has shown positive results when examined for reliability and consistency.<sup>6</sup> The tool examines 16 common barriers shown to affect self-sufficiency (such as employment, housing, food security, mental health, disability, domestic violence and substance abuse) and helps provide a picture of their strengths and needs in each area. It is worth noting that most of these SSM barriers have also been linked to lower employment among the TANF population (specifically, education, work experience, mental and physical health, disability, child care needs, substance abuse, and domestic violence).<sup>7</sup> In this manner, the SSM informs individualized goal setting and action planning. When administered at program enrollment and exit, the SSM also becomes a way to gauge families' positive progression towards greater self-sufficiency.

Some challenges with the Self-Sufficiency Matrix (SSM) in Iowa have been identified by the FaDSS Program and local grantee staff: one is whether all 16 content areas remain useful, or if any important areas are missing. A second is that the matrix itself is viewed as confusing and lacking specific details. As a result it is unclear the degree to which the SSM results consistently reflect levels of family need across the grantee agencies and can be used to gauge progress. The final challenge is that local grantee agencies do not use a common set of questions or evidence-based assessment tools by which to determine the head of households' self-sufficiency. Instead, the "how" is left up to

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<sup>5</sup> The Snohomish County Self-Sufficiency Taskforce. (2004). *Self-Sufficiency Matrix: An Assessment and Measurement Tool Created Through a Collaborative Partnership of the Human Services Community in Snohomish County*. Accessed 9/30/2014 from <http://snohomishcountywa.gov/DocumentCenter/View/7131>

<sup>6</sup> Fassaert, T., Lauriks, S., van de Weerd, S., Theunissen, J., Kikkert, M., Dekker, J., Buster, M., & de Wit, M. (2013). Psychometric Properties of the Dutch Version of the Self-Sufficiency Matrix (SSM-D). *Community Mental Health Journal*.

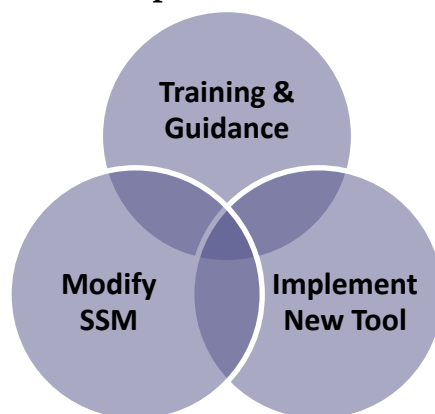
<sup>7</sup> Bloom, D., Loprest, P.J., & Zedlewski, S.R. (2011). *TANF recipients with barriers to employment*. Washington, D.C.: Urban Institute.

individual program discretion, opening the program up to a wide range of standards when determining a family's needs. Each of these complications has different solutions to consider which are discussed in turn.

The first challenge for the SSM relates to content and whether the tool contains the right domains and was raised by local grantee staff. Specifically, some indicated that Adult Education and Training is not present, while others noted that Energy Independence is not particularly useful. In terms of trending reliability, modifications such as taking one domain away or adding a new one will not affect the remaining areas. Relatively modest changes such as these would nonetheless require some additional training (to cover the new content), as well as updates to the paper version of the tool, the Web-based Profile and current data analysis protocols.

The difficulty expressed about the clarity of the SSM can be addressed in four ways: improving the training and guidance provided to FDS, modifying the SSM tool to improve specificity, implementing a new tool to gauge self-sufficiency, or some combination of the previous three options (see Figure 2).

**Figure 2. Options to Improve the Self-Sufficiency Matrix**



Improved training and guidance would require additional FaDSS staff time to identify areas for clarity and revising the documentation and curricula accordingly. While these enhancements would certainly produce improvements, they would not address challenges with a lack of clarity in the tool itself. Modifying the existing tool would require some research into what exactly to modify, looking at other tools, discussing what to keep and what to change. Any changes would also require additional training, curricula and documentation modifications, and updates to the *Web-based Profile*. This option would fix some of the challenges where the tool is not detailed enough. Implementing an entirely new tool would require an even greater level of resources for re-training and documentation, as well as changes to the on-line database to record it, and (potentially) learning a new data analysis protocol. Trending also becomes

compromised when any changes are made because comparisons cannot be made to different tools or to items that have undergone significant revisions. Moreover, a review of existing tools and assessments reveals few alternatives available that demonstrate greater levels of validity or evidence of effectiveness than the SSM.

**Box 3.**  
**Strength-based Assessment**

A core principle of the FaDSS program is that it delivers strength-based, solutions focused services. However, very little of the information currently being collected by the program, including the SSM and the DOS, actually measures family strengths or developmental assets.

The program should consider incorporating an evidence-based tool into its regular data collection protocols. Many such assessments exist, a selected sample of which is listed below. Moreover, many of these tools are designed to be administered in a pre-/ post- fashion, thereby capturing the positive growth in strengths and assets associated with program participation (see the following section for more discussion).

- Developmental Assets Profile
- Employment Hope Scale
- Family Empowerment Scale
- Life Skills Progression
- Protective Factors Survey

To address the issue of inconsistency across the programs in how information is collected and fed into any measure of self-sufficiency, FaDSS should consider two options. One is to articulate clearly the questions and information that should be collected in order to complete the SSM and require all grantees to use them. For example, a program in Santa Clara, CA uses a matrix based on the Arizona model (the same foundation for the SSM used by FaDSS) and has outlined a series of yes or no questions for each domain that the worker collects from the family; the worker in turn counts up the appropriate responses to determine the final rating.<sup>8</sup>

Another example is *My Self-Assessment* used in Oregon, which is structured similarly but does not have a scoring component.<sup>9</sup> As a self-assessment, the Oregon tool asks very specific questions of the participant and removes some of the service provider subjectivity from the process, although families may not answer the same questions consistently. Such a tool could be used by FaDSS staff to collect consistent information from all families and round out the SSM rating. While neither of these examples is fully evidence-based, a 2011 report notes that most promising tools used around the nation to assess barriers to employment for

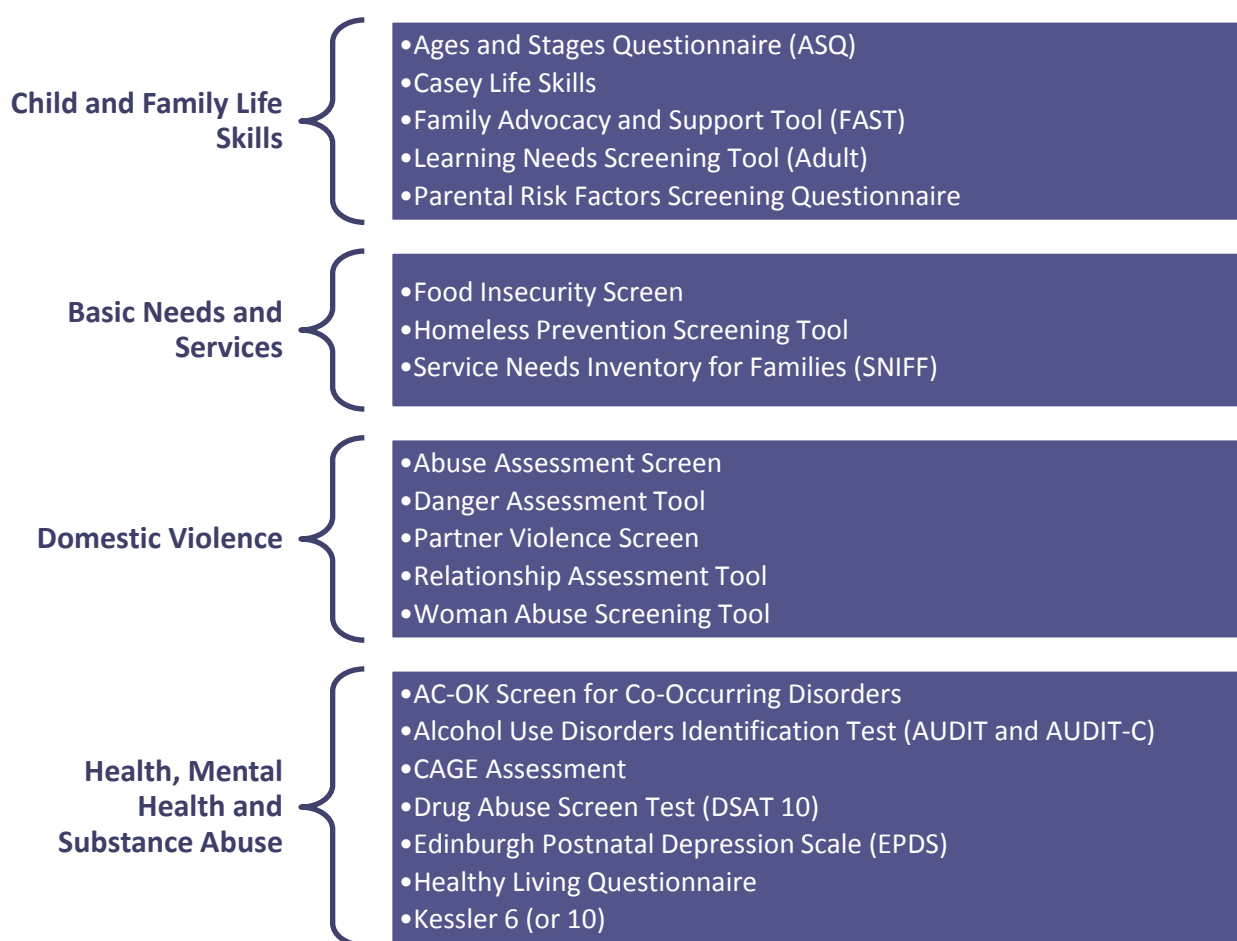
<sup>8</sup> Accessed 9/30/2014: <http://www.ctagroup.org/hmis/santa-clara-hmis/matrix-module/>

<sup>9</sup> Accessed 9/30/2014: <https://apps.state.or.us/Forms/Served/de7823.pdf>

TANF recipients have not been rigorously evaluated.<sup>10</sup>

A second option is for FaDSS to require programs to use evidence-based assessment and screening tools to complete the SSM and support this requirement by compiling a list of approved assessment and screening tools for each domain, acknowledging that some might cover more than one domain; programs could then select which tools to use. Box 3 on the previous page discusses strength-based assessments specifically, while Figure 3 provides a snapshot of common assessment and screening tools that are evidence-based and align with the SSM categories.

**Figure 3. Selected Sample of Assessment and Screening Tools**



<sup>10</sup> Bloom, D., Loprest, P.J., & Zedlewski, S.R. (2011). *TANF recipients with barriers to employment*. Washington, D.C.: Urban Institute.

When considering screening and assessment options, some literature has cautioned programs to find the proper balance between formal and informal assessment. On one hand, formal assessments ensure that common information is collected from all families. On the other, some have expressed concerns that relying overmuch on formal screening and assessment tools may lead staff to miss other need areas that might emerge through a more informal process. Specifically, guidance in 2001 for TANF programs recommended “informal assessment” with the idea that one size does not fit all, and instead recommended providing detailed guidance on what information to look for.<sup>11</sup>

Another study generally found a great degree of correlation between front-line staff assessments and self-report, but noted that mental health, alcohol dependence and domestic violence were areas where the front-line assessment process could be enhanced by using validated scales.<sup>12</sup>

It is also important to note that implementing these tools would require additional data collection for the FaDSS program at the local grantee level; at the very least, use of the tools might require grantee agencies to collect the information in a different way. This in turn may require the FaDSS program to provide additional training to Family Development Specialists, at least in the short-term, to learn how to use new tools in relation to the SSM. The illustration at right provides questions to consider in selecting assessment strategies and tools.

#### Important Questions to Ask When Considering Assessment Strategies

- What is the purpose of the assessment?
- What areas should the assessment cover?
- When should the assessment be conducted?
- To whom should the assessment be targeted?
- How will the information be used?
- Who will conduct the assessment?

Adapted from: Pavetti, L., Derr, M., and Sama Martin, E. (2008). *Conducting in-depth assessments: Assisting TANF recipients living with disabilities to obtain and maintain employment*. Mathematica Policy Research, Inc.

<sup>11</sup> Thomson, T.S., Van Ness, A., O'Brien, C.T. (2001). *Screening and Assessment in TANF/Welfare-to-Work: Local Answers to Difficult Questions*. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families. Accessed 9/30/2014:

<http://aspe.hhs.gov/daltcp/reports/scrnasmt.pdf>

<sup>12</sup> Born, C., Ovwigbo, P.C., & Saunders, C. (2005). *Barriers to Independence among TANF Recipients: Comparing Caseworker Records and Client Surveys*. Baltimore, M.D.: Family Welfare Research and Training Group, School of Social Work, University of Maryland. Accessed on 9/30/2014:

[http://www.familywelfare.umaryland.edu/articles/barriers\\_to\\_independence.pdf](http://www.familywelfare.umaryland.edu/articles/barriers_to_independence.pdf)



## **Sustainability of Positive Changes: Capturing Outcomes After Program Exit**

Currently the FaDSS program lacks a reliable method by which to determine whether the positive changes observed among families at program exit are durable; that is, to what extent do families continue to experience success as a result of the program? To address the long-term outcomes referenced in the logic model FaDSS should consider issuing a follow-up survey that will allow the program to gauge the extent to which positive program impacts are sustained. Questions should be quantifiable (that is, few open-ended questions) and cover topics such as current employment status, wages, use of other benefits programs, family functioning, subsequent hardships and skills in managing those hardships, access to needed services, and overall perceptions of health and well-being. Participants should be asked to rate the extent to which the program affected their post-exit successes.

Should the FaDSS program choose to incorporate a strengths-based assessment into its service delivery model (again, see the discussion in Box 3), the program should consider how that tool could be used in combination with the items listed above. With this approach, it would be imperative to collect a "baseline" measurement for any of these tools by which to gauge progress and sustainability. Ideally, a strength assessment would be collected at three points: baseline, exit and six months after exiting the program. Relying on strength-based assessments is a common practice in Iowa, where surveys such as the Protective Factors Survey are currently being used to measure positive results over time for home visiting programs around the state.

## **Interpreting Results: Expectations, Analysis and Presentation**

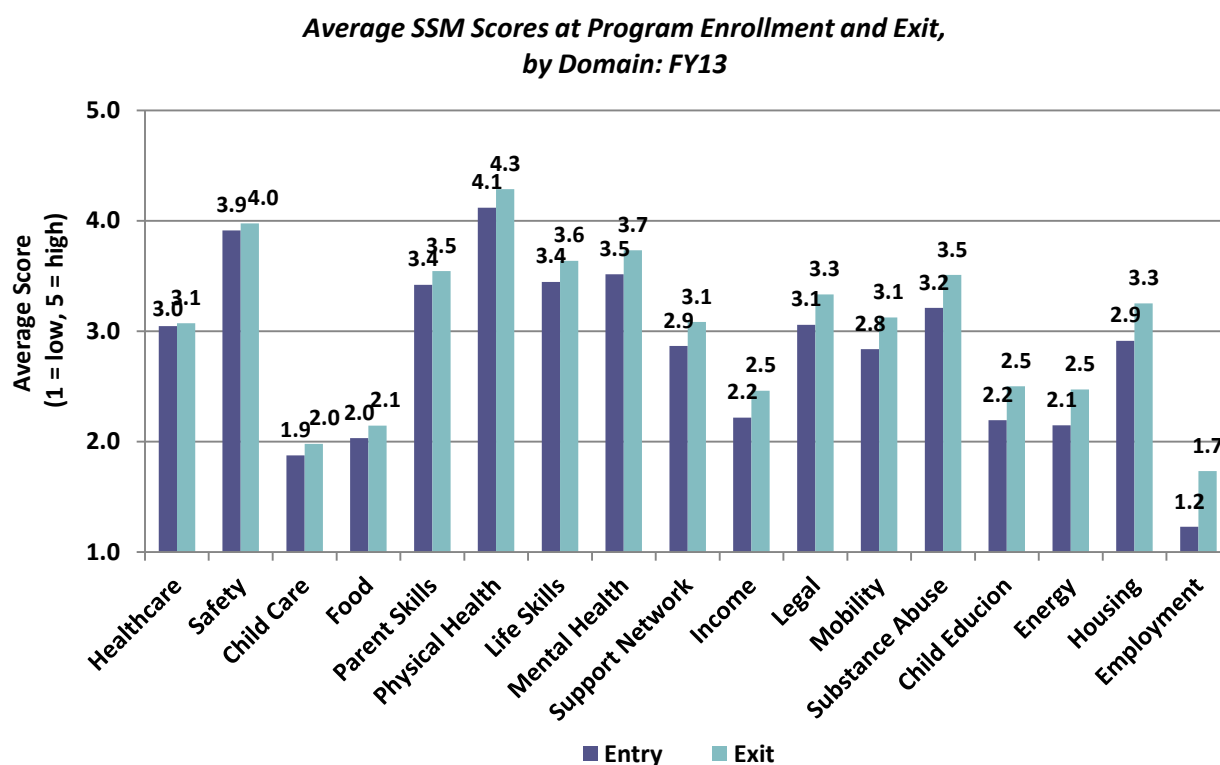
Showing how participants have improved as a result of a program is the ultimate goal of an evaluation and is best achieved through making comparisons. Ways to do this include capturing the same measure at various points in time (e.g., annually), looking at the same information before and after participation (i.e., pre/post), or by comparing two groups (e.g., participants and non- participants). The latter option can be simple or complex, with the most rigorous standard being a randomized control group (that is, randomly assigning eligible individuals to the program, or not, and collecting information for both groups).

Upon reviewing the FaDSS documents, the program has the capacity to report on many existing measures in an evaluative manner. Indeed, the SSM is collected at program enrollment and exit and should be presented in this manner. Figure 4 provides an example of how the SSM data could be displayed more effectively to demonstrate the positive results associated with participation in the FaDSS program using FY2013 data.



Ideally, these scores will be presented only for families who have completed both a pre- and a post- assessment. Another comparison that could be useful for the program to consider is the SSM scores among those individuals who are considered “difficult to serve” (based on the Difficulty of Service Scale) compared to those who are not. This can lend insight into whether the FaDSS program is more effective for the harder to employ population, a hypothesis that is supported by current research findings for similar programs.<sup>13</sup>

**Figure 4. Example of SSM Pre-/Post- Presentation**



Programs such as FaDSS may want to articulate certain rates or standards as measures of success. Establishing targets related to program metrics and family outcomes that are reviewed regularly helps articulate what a program hopes to attain and whether or not the program is meeting (or exceeding) its expectations. Currently the FaDSS program allows local grantees a great deal of flexibility to report on their annual achievements. However, FaDSS could strengthen its evaluation reporting by settling on a set of standard program metrics upon which to report each year and presenting the results annually, aggregating the information at the state level and showing the variation

<sup>13</sup> Meckstroth, A., Burwick, A., and Moore, Q. (2008). *Teaching self-sufficiency: An impact and benefit-cost analysis of a home visitation and life skills education program. Findings from the welfare-to-work strategies demonstration evaluation*. Final Report. Mathematica Policy Research, Inc.

**Box 4.****Accessing and Analyzing Data**

Of paramount importance to any evaluation is the availability of quality data and the ability to access information quickly and reliably. FaDSS has an online data system built and maintained through in-kind donation which enables it to collect much of its information easily. However, modifying reports and accessing information on a regular basis is problematic in the current structure.

FaDSS may want to explore options for developing a local data analysis system for state level staff into which extracts from the existing online system can be loaded regularly. Such a system could produce frequently required reports based on newly acquired data, as well as support annual evaluations. Thinking bigger, the system could also become a repository for site visit results and other state-level program monitoring information, thereby providing one place in which to store program information. This would also facilitate linkages across data sources, enabling analyses looking at family outcomes by program characteristics and fidelity results.

Investing in a data analysis system would certainly have up-front costs as well as on-going maintenance needs. However, these costs would easily be off-set by a significant reduction in program staff time needed to produce reports, as well as increased reporting flexibility and more routine availability of program data.

among grantees. Indeed, the program already articulates standards around program delivery such as caseload ratios, supervision standards and local agency capacity which allows for comparisons across programs. Taking this a step further to identify a set of common indicators relating to outputs and outcomes that are monitored annually will enable the program consistently to demonstrate that targets are being achieved, allow for comparisons across programs and demonstrate areas where progress has been achieved over time. At minimum, the annual program report should include for each grantee agency a summary of the Direct Service outputs and short-term outcomes articulated in this evaluation plan (see Tables 1 and 2) such as the number of families served by each program, the number exiting, the proportion with advanced employment skills, and so forth.

Another important comparison for FaDSS to present is trends over time. For example, have rates of educational attainment among program participants increased, decreased or remained the same when compared to previous years? This can be a useful analytic tool in combination with targets to demonstrate progress even when a goal has yet to be attained and can be used to beef up the program itself where performance is falling short.

**Cost-Benefit Methodologies**

While not a full-blown cost-benefit analysis, the program's current use of the Return on Investment (ROI) calculation is a valid and realistic methodology for presenting

comparative measures of the program's cost-effectiveness. The program's formula generally follows best practice standards, which suggest that the program effects on earnings, taxes and transfer payments always appear in the numerator, while the program operating costs appear in the denominator. Some methods look at ROI from three perspectives: to the participant, to the government and to society, which is simply the total of the two other categories.<sup>14</sup> It should be noted that the ROI can be used to compare effectiveness across programs (with limitations) or across time; however, ROI is sensitive to programmatic changes and may fluctuate based on factors unrelated to participant outcomes. Also note that when trending estimates of ROI to see relative effectiveness over time, annual estimates should be adjusted for inflation by converting them into current dollars.

Complex and comprehensive programs such as FaDSS are often analyzed through a more robust cost-benefit analysis that examines program benefits in relation to program costs over an extended timeframe that takes into account the benefits to society as described in Box 5.

**Box 5.****Cost Benefit Analysis for Programs**

*"A program that is not cost-effective from the perspective of a particular agency within its limited mission and budget may well be cost-effective from the perspective of society, because it saves expenses or prevents programs in other areas." (Sewell and Marczak).*

Simply accounting for program costs and the amount of dollars saved in a given year (that is, the monetary units associated with program inputs and outputs) does not take into benefits for participants or the government.

For example, benefits to program participants include increased wages and future wage growth, while benefits to the government accrue through reduced use of support programs and increased tax revenue (Greenburg *et al*, 2009). In addition, the benefits may grow (or shrink) over time as participants continue to realize positive gains.

Even more broadly, there are non-monetary benefits reaped by society from a stronger and more stable workforce, improved health status and increased well-being for children, which are generally not included (Greenburg *et al.*, 2009).

<sup>14</sup> *Welfare-to-Work Program Benefits and Costs: A Synthesis of Research*. David Greenberg, Victoria Deitch, Gayle Hamilton. February 2009. MDRC.

However, the analysis is very sensitive to the timeframe covered by the factors it uses, and how it uses them. Indeed, many cost benefit studies of welfare-to-work programs do not take into account intangible factors at all due to the complexity and the perceived subjectivity of assigning a monetary value to them.<sup>15</sup>

To be rigorous and valid, a true cost benefit analysis should be performed only by those with professional knowledge of how to do it. This evaluation plan therefore does not recommend that the FaDSS program engage in a full cost-benefit analysis as a regular aspect of its on-going evaluation efforts. However, the program may want to consider such a study as a special effort conducted by professionals with specialized expertise at certain intervals (e.g., every five years). Should such a study be commissioned, FaDSS should require the study to rely upon the existing frameworks that have been outlined by leading experts such as The Children's Bureau, MDRC and the Washington State Institute for Public Policy (WSIPP).

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<sup>15</sup> *Ibid.*

## Conclusion

This plan has laid out a solid, evidence-based foundation for the FaDSS program to use in implementing and enhancing its evaluation activities in the future. As stated earlier, however, program evaluation plans are hardly static as research, standards and approaches emerge and shift. Future changes should be considered, keeping in mind feasibility and quality.

